

Proposal for Legislation -- 2017
Make Minor In Possession Data Report Available from Office of Court Administrator

Return to:

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PROPOSER'S NAME/TITLE:

ORGANIZATION: Department of Public Health and Human Services

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1. What is the problem or issue?

Current statutes require the Montana Department of Health and Human Services to maintain a list of minor in possession (MIP) convictions and make it available on request to peace officers and courts. However, this information isn't generated by DPHHS, and the data the department receives is partial and intermittent.

2. What do you want the legislation to do?

Update statute to reflect current practices and provide that MIP data is available directly from the Office of the Court Administrator. The data system at Office of the Court Administrator has the ability to accurately track MIP convictions and is able to report MIP data directly, improving efficiency and reducing duplication. The Office of the Court Administrator supports this change.

3. If possible, please list the MCA (Montana Code Annotated) sections that would need to be amended.

45-5-624(7) & (8)(f)

4. If the proposed change requires additional funding, what funding sources do you propose?

No funding is required.

5. Has similar legislation been requested in the past, been introduced in another state, or provided as a model act? If so, please provide a citation, reference, or point of contact.

No

Proposal for Legislation -- 2017 **Allow Biennial County Matching Grants**

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1. What is the problem or issue?

The statute currently requires counties to submit yearly county matching grant applications for local crisis intervention and jail diversion programs to the Department's Addictive and Mental Disorders Division. The application process can be burdensome to county and state resources and discourages longer-term projects.

2. What do you want the legislation to do?

Revise laws requiring the Department to contract with counties yearly for the county matching grant program. The change would allow the Department to contract on a biennial basis increasing efficiency at the state and county level.

3. If possible, please list the MCA (Montana Code Annotated) sections that would need to be amended.

This requires changes to 53-21-1203(1).T

4. If the proposed change requires additional funding, what funding sources do you propose?

No additional funding is required.

5. Has similar legislation been requested in the past, been introduced in another state, or provided as a model act? If so, please provide a citation, reference, or point of contact.

Not to change this section of statute.

Proposal for Legislation -- 2017

Behavioral Health Care Act

Return to:

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1. What is the problem or issue?

Increasing access to behavioral health care is a top Montana priority. While Mont. Code Ann. § 53-24-204(2)(a) requires DPHHS to approve substance abuse treatment facilities to ensure facilities standards are met, Mont. Code Ann. § 53-24-208(2) prohibits DPHHS from approving additional substance abuse services in areas where an existing facility already provides such services. This effectively establishes a monopoly of one substance abuse facility for one area, limits access for clients who need substance abuse treatment, and forces clients to wait for available openings in existing programs. These statutes originated almost 40 years ago and have not been updated in the last 13 years, and should be updated to allow an increase in this aspect of behavioral health care.

2. What do you want the legislation to do?

Remove the arbitrary limitation of the number of allowed service providers to improve behavioral health care access and reduce provider shortages. This legislation would allow the Department to approve more than one provider serving a given area. These statutes need to be updated to allow increased providers, competition and jobs and to ensure the delivery system can match patient need.

3. If possible, please list the MCA (Montana Code Annotated) sections that would need to be amended.

This includes statutes 53-24-204 & 53-24-208.

4. If the proposed change requires additional funding, what funding sources do you propose?

Increased access to care may reduce the costs in many areas (such as jails, courts, hospitals, outpatient clinics, and detox programs) as more clients receive treatment and maintain sobriety. Access to the right level of care in the right environment can reduce costs. More diverse treatment options also allow alignment of treatment with the appropriate level of evidence-based care that best match the individual needs of clients.

5. Has similar legislation been requested in the past, been introduced in another state, or provided as a model act? If so, please provide a citation, reference, or point of contact.

No

Proposal for Legislation -- 2017
Protect Seniors from Financial Crimes and Clean Up

Return to:

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1. What is the problem or issue?

- The Adult Protective Services program in the Senior Long Term Care Division is responsible for investigating and providing vulnerable adults protective services from abuse, neglect and exploitation. The statutes that provide APS authority are found in Montana Code Annotated, Title 52, which addresses Family Services, Chapter 3 of which specifically addresses Adult Services. Part 2 of Chapter 3 is the "Protective Services Act for Aged Persons or Disabled Adults", and Part 8 is the "Montana Elder and Persons with Developmental Disabilities Abuse Prevention Act." The Legislature enacted Part 8 after Part 2, and left these two related acts separate, which causes confusion, and sometimes leads client representatives to call agencies other than APS, such as the Quality Assurance Division.
- The National Adult Protective Services Association has stated that financial exploitation is a fast-growing form of abuse of seniors. Although federal law permits employees of financial institutions to report abuse and exploitation, it does not require them to do so, which leaves the reporting of this form of senior abuse in legal grey area.
- Mont. Code Ann. 45-6-333 sets the penalty for exploitation of seniors. The update of the statute during the last legislative session inadvertently included a definition of "seniors" as persons aged 65 years or older. This conflicts with other statutes which define "seniors" as persons aged 60 years or older, including the federal Older Americans Act and the Montana Elder and Persons with Disabilities Abuse Prevention Act.

2. What do you want the legislation to do?

- Combine Title 52, Chapter 3, Parts 2 and 8, and update terminology to alleviate confusion and clarify that investigating abuse, neglect and exploitation of vulnerable adults is the role of APS.
- Make employees of financial institutions mandatory reporters of financial abuse of seniors.
- Amend Mont. Code Ann. § 45-6-333 to define "seniors" as persons aged 60 years or older, consistent with the Older Americans Act and the Montana Elder and Persons with Disabilities Abuse Prevention Act.

3. If possible, please list the MCA (Montana Code Annotated) sections that would need to be amended.

Part 2 (52-3-201 through 207) and Part 8 (52-3-801)

4. If the proposed change requires additional funding, what funding sources do you propose?

There is no projected fiscal impact as a result of these clarifications to the statutes.

5. Has similar legislation been requested in the past, been introduced in another state, or provided as a model act? If so, please provide a citation, reference, or point of contact.

Statutes in other states such as Washington, Idaho, Wyoming, North Dakota, South Dakota, Oregon